	DEC 0 9 2007 3 Under the Page Work Reduction Act of 1995, no persons are		. Patent and Trademark Of	fice; U.S. DE	PTO/SB/22 (10-00) 10/31/2002. OMB 0651-0031 PARTMENT OF COMMERCE is a valid OMB control number.
	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional) SEL 209	
F	In re Application of Jun Koyama				
	Ar	oplication Number	09/666,521		Filed September 20, 2000
-	Fo	For EL Display Device And Electronic Device			
	Gr	roup Art Unit 2674		Examiner K. Nguy	
	This is a request under the provisions of 37 (reply in the above identified application.		xtend the period for	<u>-</u>	
	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):				
	One month (37 CFR 1.17(a)(1))		RECEIVED		\$
	X Two months (37 CFR 1.17(a)(2)))	DEC 1 0 2002		\$_400.00
ì	☐ Three months (37 CFR 1.17(a)(☐ Four months (37 CFR 1.17(a)(4	Tor	hnology Center 26	00	\$ \$
'	Five months (37 CFR 1.17(a)(5))				
•/	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ X A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. X The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1039 I have enclosed a duplicate copy of this sheet.				
-					
	I am the applicant/inventor				
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). X attorney or agent of record.				
	attorney or agent under 37 Registration number if acting		a)		
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
i	17-3-02		MMM		
	Date	/-	Signa	ture	
/10/2002 A	OSMAN1 00000022 09666521		Mark J. N		
FC:1252	400.00 OP		Typed	or printe	d name
Ĺ	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
	Total offorms are submitted.				

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.